



Application Data Sheet

Application Information

Application number::
Filing Date:: 01/29/04
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Remote Video Inspection System
Attorney Docket Number:: 702-102
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 36
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Clark
Middle Name::
Family Name:: Bendall
Name Suffix::
City of Residence:: Syracuse
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 4914 Cornish Heights Parkway
City of Mailing Address:: Syracuse
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13215

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Tom
Middle Name::
Family Name:: Britton
Name Suffix::
City of Residence:: Syracuse
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 4561 Ashfield Terrace
City of Mailing Address:: Syracuse
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13215

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Edward
Middle Name:: B.
Family Name:: Hubben
Name Suffix::
City of Residence:: Skaneateles
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 108 Fennell Street
City of Mailing Address:: Skaneateles
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13152

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas
Middle Name:: W.
Family Name:: Karpen
Name Suffix::
City of Residence:: Skaneateles
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 3534 Mill Run Terrace
City of Mailing Address:: Skaneateles
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13152

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas Eldred
Middle Name::
Family Name:: Lambdin
Name Suffix::
City of Residence:: Auburn
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 3881 Miller Road
City of Mailing Address:: Auburn
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13021

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ray
Middle Name::
Family Name:: Lia
Name Suffix::
City of Residence:: Auburn
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 32 Chedell Place
City of Mailing Address:: Auburn
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13021

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jon
Middle Name::
Family Name:: Salvati
Name Suffix::
City of Residence:: Skaneateles
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 3552 County Line Road
City of Mailing Address:: Skaneateles
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13152

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Joshua
Middle Name::
Family Name:: Scott
Name Suffix::
City of Residence:: Jordan
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 8 Locktenders Drive
City of Mailing Address:: Jordan
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13080

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ken
Middle Name::
Family Name:: von Felten
Name Suffix::
City of Residence:: Cazenovia
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 3589 Pompey Hollow Road
City of Mailing Address:: Cazenovia
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13035

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Todd
Middle Name::
Family Name:: Abernethy
Name Suffix::
City of Residence:: Skaneateles
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 3325 Kane Avenue
City of Mailing Address:: Skaneateles
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13152

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Scott
 Middle Name::
 Family Name:: Osiecki
 Name Suffix::
 City of Residence:: Skaneateles
 State or Province of Residence:: NY
 Country of Residence:: US
 Street of Mailing Address:: 47 East Street
 City of Mailing Address:: Skaneateles
 State or Province of Mailing Address:: NY
 Country of Mailing Address:: US
 Postal or Zip Code of Mailing Address:: 13152

Correspondence Information

Correspondence Customer Number:: 20874

Representative Information

Representative Customer Number::	20874
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/443,521	01/29/2003
This Application	An application claiming the benefit under 35 USC 119(e)	60/520,996	11/18/2003

Assignee Information

Assignee Name:: EVEREST VIT, INC.
Street of mailing address:: 199 Highway 206
City of mailing address:: Flanders
State or Province of mailing address:: New Jersey
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 07836